

# PLUMBING APPLICATION

Maine DHHS/CDC – Division of Environmental & Community Health

PROPERTY ADDRESS			ISSUING MUNICIPAL OFFICE		
City, Town, or Plantation	Lamoine		Town/City	Lamoine	
Street/Subdivision Lot #	RT # 204		Permit #	1932	Total Fee \$ 40
PROPERTY OWNER INFORMATION			Date Issued	11/28/18	Double Fee
Name (Last, First)	Durrell				
Applicant Name (Last, First)	Stacey		Local Plumbing Inspector Signature Zelmer Chisner		
OWNER/APPLICANT MAILING ADDRESS			License #	394	
Street	PO Box 134		FEES	State \$ 10	Local \$ 30
City	Seal Cove		LOCATION	Map # 7	Lot # 3-4
State	ME	Zip Code 04674	Internal plumbing fixtures and piping may not be installed until a permit is issued by the Local Plumbing Inspector. The permit authorizes the owner or installer to install the plumbing system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.		
OWNER/APPLICANT STATEMENT			CAUTION: INSPECTION REQUIRED		
I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector(s) to deny a permit.			I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.		
Signature of Owner/Applicant <i>Stacey Durrell</i>		Date 11/28/18	LPI Signature		Date (Rough-In)
Copy: Property Owner <input type="checkbox"/> Town <input type="checkbox"/> State <input type="checkbox"/>			Date (Final)		

PERMIT INFORMATION					
This application is for:		Type of structure to be served:		Plumbing to be installed by:	
New Plumbing <input checked="" type="checkbox"/>		Single Family Residence <input type="checkbox"/>		Master Plumber <input type="checkbox"/> License #	
Relocated Plumbing <input type="checkbox"/>		Modular or Mobile Home <input checked="" type="checkbox"/>		Oil Burner Installer <input type="checkbox"/> License #	
		Multiple Family Dwelling <input type="checkbox"/>		Mfd. Housing Rep. <input checked="" type="checkbox"/> License #	
		Other (specify below) <input type="checkbox"/>		Public Utility Rep. <input type="checkbox"/> License #	
				Property Owner <input type="checkbox"/>	
Column 1 – Hook-Up & Relocation	Column 2 – Fixtures		Column 3 – Fixtures		<b>State of Maine</b> Department of Health and Human Services/ Center for Disease Control and Prevention Environmental & Community Health – Subsurface Wastewater 286 Water Street State House Station 11 Augusta, ME 04333 207-287-2070 HHE-211 Revised 7/24/2018
Maximum 1 Hook-Up	Type of Fixture	Qty	Type of Fixture	Qty	
Hook-Up (a) <input type="checkbox"/> <i>Hook-up to public sewer in those cases where the connection is not regulated and inspected by the local sanitary district.</i>	Hosebib/Sillcock		Bathtub (and Shower)		
	Floor Drain		Shower (Separate)		
	Urinal		Sink		
	Drinking Fountain		Wash Basin		
Hook-Up (b) <input checked="" type="checkbox"/> <i>Hook-up to an existing subsurface wastewater disposal system.</i>	Indirect Waste		Water Closet (Toilet)		
	Treatment Softener, Filter, etc.		Clothes Washer		
	Grease/Oil Separator		Dishwasher		
Piping Relocation <input type="checkbox"/> <i>Relocation of sanitary lines, drains, and piping without new fixtures.</i>	Roof Drain		Garbage Disposal		
	Bidet		Laundry Tub		
	Other:		Water Heater		
Total Column 1 0 +		Total Column 2 0 +		Total Column 3 0 = Enter Total Fixtures / Hook-Ups Below	
PERMIT TRANSFER ONLY <input type="checkbox"/> \$10.00					Total Fixtures / Hook-Ups 0 \$40 Per Fixture Fee \$ <b>TOTAL PERMIT FEE \$40</b>